PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

106,6727

CLAIMS AS FILED - PART I (Column 1)						mn 2)		SMALL ENTITY TYPE				OTHER THAN	
TOTAL CLAIMS			125					ATE	FEE	OR	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BAS	C FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			した minus 20=		*		X	9=		OR	X\$18=	1	
INDEPENDENT CLAIMS			{ minus 3 =		*		X.	12=	1	OR	X84=		
MU	LTIPLE DEPEN	IDENT CLAIM PI				+1	 40=		OR	+280=			
* if	the difference	in column 1 is	less than ze	ss than zero, enter "0		0" in column 2		TAL		OR	TOTAL	-750	
	С	LAIMS AS A	MENDED) - PART II			<u> </u>			,	OTHER	THAN	
(Column 1)			Military-Month Cold Toron	(Column 2)		(Column 3)	ımn 3) SMAL		ENTITY	OR	SMALL	NTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	R/	NTE.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=		
	Independent	*	Minus	***	CL AIM	= 	X4	2=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								40=		OR	+280=		
								OTAL . FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)										•			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Totaí	*	Minus	**		=	X\$	9=		OR	X\$18≈		
	Independent	* NTATION OF MU	Minus	***	F O1 A114]=	X4	2=		OR	X84=		
<u> </u>	rinoi Pheoe	NTATION OF MIC	DLIPLE DEF	ENDEN	CLAIM		+14	10=		OR	+280=		
								OTAL			TOTAL		
		(Column 1)		(Colur	mn 2)	(Column 3)	ADDIT	. FEE I	<u></u>	ļ	ADDIT. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE	!	RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=		
	Independent	*	Minus	***	F CL AINA] =	X4	2=		OR	X84=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CCAIIVI		+14	l0=		OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE										OB !	TOTAL		
***	If the "Highest Nu	mber Previously Pa ber Previously Pa	aid For" IN THI	S SPACE	is less tha	n 3, enter "3."	AUUII		propriate box		ADDIT. FEE I lumn 1.		